

*Application for Active Membership*  
IN  
**The Kokoon Arts Club**

2121 East 21st Street, Cleveland, Ohio

Date *Sept. 28, '25*

Name *Robert E. Wolfe*

Home Address *3226 Euclid* Phone *Bro. 145*

Occupation *Artist* Business Address *same*

Previous Art Training *C. O. F. A. Academie Julian Paris*  
Give name of School and length of course taken

References: *John Robinson*

Give names of two active members

The Initiation Fee of \$25.00 must accompany this application, same to be returned in case of applicant's non-election.

Monthly dues of \$2.00 will start the first of the month following date of notice of election. Dues payable quarterly in advance.

Applicants are required to present three or more of their drawings which will be judged by the membership committee to determine their eligibility.

Application received and posted *Sept. 22-25*

Applicant elected and notified *10/28/25*

Paid \$..... Treasurer .....

Secretary *write letter 10-29*

*Payment due*